Major Donor and			COMMITTEE STATEMENT			
Independent Expenditure Commit Campaign Statement (Government Code Sections 84200-84216.5)	or print in ink.	Date Stamp	CALIFORNIA FORM	461		
	Statement covers period	Date of election if applicable:	1	1/2		
Amendment	from01/01/2017	(Month, Day,Year)		For Official Use Only		
SEE INSTRUCTIONS ON REVERSE	through06/30/2017	11/06/2018				
1. Name and Address Of Filer		3. Summary				
NAME OF FILER (Include name(s) of all affiliated entities whose contributions are included in this statement.) SOUTHWORTH,LUCINDA PAGE		(Amounts may be rounded to whole dollars.) 1. Expenditures and contributions (including loans) of \$100 or more				
MAILING ADDRESS	(NO. AND STREET)	made this period. (Part	,	\$ 	29200.00	
CITY	STATE ZIP CODE	2. Unitemized expenditure contributions (including \$100 made this period.	loans) under	\$ —	0.00	
PALO ALTO RESPONSIBLE OFFICER (If filer is other than an individual)	CA 94303 AREA CODE/DAYTIME PHONE	Total expenditures and made this period. (Add	Lines 1 + 2.)	SUBTOTAL \$ —	29200.00	
LUCINDA SOUTHWORTH		4. Total expenditures and				
2. Nature and Interests of Filer (Compl	ete each applicable section.)	made from prior statem amount from Line 5 of	•			
A FILER THAT IS AN INDIVIDUAL MUST LIST THE NAME OF EMPLOYER OR, IF SELF-EMPLOYED, THE NAME, AI	, ADDRESS, AND BUSINESS INTERESTS DDRESS, AND NATURE OF THE BUSINESS	filed. If this is the first			0.00	
NAME OF EMPLOYER/BUSINESS	BUSINESS INTERESTS	the calendar year, ente	r zero.)	\$ —	0.00	
SELF-EMPLOYED ADDRESS OF EMPLOYER/BUSINESS	INVESTOR/PHILANTHROPIST	1 (1 1 3 1 1 1)	since			
	94303	January 1 of the curren (Add Lines 3 + 4.)		TOTAL \$	29200.00	
A FILER THAT IS A BUSINESS ENTITY MUST DESCRIBE ENGAGED A FILER THAT IS AN ASSOCIATION MUST PROVIDE A S		4. Verification I have used all reasonable reviewed the statement an contained herein is true an the laws of the State of Ca	d to the best of my kr d complete. I certify	nowledge the inforn under penalty of p	nation erjury under	
A FILER THAT IS NOT AN INDIVIDUAL, BUSINESS ENTI-		Executed onO7/20/2017	SI	SOUTHWORTH GNATURE OF INDIVIDUAL DC BLE OFFICER IF OTHER THAI		

Major Donor and Independent Expenditure Committee Campaign Statement

Type or print in ink.
Amounts may be rounded to whole dollars.

INDEPENDENT EXPENDITURE COMMITTEE AND
MAJOR DONOR COMMITTEE STATEMENT

Statement covers period		CALIFORNIA	161
from	01/01/2017	FORM	461
through	06/30/2017	2/2	

SEE INSTRUCTIONS ON REVERSE

NAME OF FILER

SOUTHWORTH, LUCINDA PAGE

5. Contributions (Including Loans, Forgiveness of Loans, and Loan Guarantees) and Expenditures Made

(If more space is needed, use additional copies of this page for continuation sheets.)

DATE	NAME AND ADDRESS OF PAYEE (IF COMMITTEE, ALSO ENTER I.D. NUMBER)	TYPE OF PAYMENT	DESCRIPTION OF PAYMENT (IF OTHER THAN MONETARY CONTRIBUTION OR LOAN)	CANDIDATE AND OFFICE, MEASURE AND JURISDICTION, OR COMMITTEE	AMOUNT THIS PERIOD	CUMULATIVE AMOUNT RELATIVE TO THIS CANDIDATE, MEASURE, OR COMMITTEE
04/24/2017	NEWSOM FOR CALIFORNIA SAN FRANCISCO CA 94104 ID: 1375287 Reference No:	Monetary Contribution Loan Non-Monetary Contribution Independent Expenditure		GAVIN NEWSOM Governor Statewide NO: Support Oppose	29200.00	\$ Calendar Year \$ 29200.00 Other \$ 0.00

SUBTOTAL \$

29200.00